



# STATE OF NEW HAMPSHIRE

## Statement of Receipts and Expenditures

(RSA 664:6)

### 6-Month Report for CANDIDATES After 2004 General Election

I, JOHN S. (JACK) BARNES, Jr of 108 HARRIMAN HILL RD, P.O. BOX 362  
(print name) (street)  
RAYMOND, 03077, candidate for the office of STATE SENATOR  
(town/city zip code)

County of ROCKINGHAM District No. 17 for the REPUBLICAN party,

And I, FRANCES L. BARNES fiscal agent, do submit the following report of  
 receipts and expenditures.

## SUMMARY OF RECEIPTS AND EXPENDITURES 6-MONTH REPORT AFTER 2004 GENERAL ELECTION

Date of Report:

May 2, 2005 ☐

November 2, 2005 ☒

1) Surplus or deficit brought forward  
From General Election

1) \$ 7593.25

2) Total of all *receipts* since last report if a **deficit**  
was brought forward from General Election

2) \$                     

3) Total of all *expenditures* since last report if a  
**surplus** was brought forward from General Election

3) \$ 500.00

4) Balance if **SURPLUS**

4) \$+ 7093.25

5) Balance if **DEFICIT**

5) \$-                     

**RECEIVED**

OCT 25 2005

**NEW HAMPSHIRE  
SECRETARY OF STATE**

John S. Barnes, Jr  
Signature of Candidate

Frances L. Barnes  
Signature of Fiscal Agent

RSA 664:5, 7. Any candidate who has any outstanding debt, obligation, or surplus following the election shall file reports at least once every 6 months thereafter until the obligation or indebtedness is entirely satisfied or surplus deleted, at which time a final report shall be filed.

Secretary of State's Office, State House, Room 204, Concord, New Hampshire 03301

Phone: 603-271-3242 -- Fax: 603-271-6316 -- <http://www.sos.nh.gov>

email: [elections@sos.state.nh.us](mailto:elections@sos.state.nh.us)

barnes

## ITEMIZED RECEIPTS

Reporting period ending \_\_\_\_\_ 2005

Full Name of Contributor (Alphabetical Order)	Post Office Address	Amount of Contribution	Date Received	Aggregate* Contributions to Date	If contribution or aggregate contribution is over \$100 list: Occupation and Place of Business
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Total of receipts unitemized (\$25 or under) in this report \$ \_\_\_\_\_

## ITEMIZED EXPENDITURES

\*\*\*Indicate to which election expenditure applies

Paid to Whom	Post Office Address	Amount of Expense	Date of Expense	***Primary/General	Nature of Expenditure
DISASTER RELIEF STATE OF N.H.	25 CAPITOL ST. Rm 121 CONCORD, N.H.	\$500. -		O O	DONATION
				O O	
				O O	
				O O	
				O O	
				O O	
				O O	
				O O	

\*List occupation and place of business if total exceeds \$100 for primary or general election. RSA 664:6, I.